

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337653 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. NA3077, HAZARDOUS WASTE SOLID, H.C.S. (P002), 9, PGIII		1	01	26	1	P002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. H2347/IMD1/P002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLEY LAM ***								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name SHELLEY LAM			Signature Shelley Lam			Month 11	Day 17	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name RANDALL STAPLETON TRK 3023 TRC 3962 Signature Randall Stapleton Month 11								
Transporter 2 Printed/Typed Name Signature Month Day Year								
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H075		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337654 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO				U.S. EPA ID Number ILR 000 135 236			
7. Transporter 2 Company Name				U.S. EPA ID Number			
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489				U.S. EPA ID Number MID 000 724 831			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1	DT	26	T	F002
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. J12347/MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name <i>Shelly Lam</i>				Signature <i>Shelly Lam</i>		Month Day Year 11 12 12	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
	17. Transporter Acknowledgment of Receipt of Materials						
TRANSPORTER	Transporter 1 Printed/Typed Name <i>Richard Crawford</i>				Signature <i>Richard Crawford</i>		Month Day Year 11 12 12
	Transporter 2 Printed/Typed Name				Signature		Month Day Year
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number		
	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator)					Month Day Year	
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. H075		2.		3.		4.
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
	Printed/Typed Name				Signature		Month Day Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337655 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (P002), 9, PGIII	1	DT	26	1	P002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information T J123471MD17 P002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name SHELLY LAM		Signature SHELLY LAM			Month 11	Day 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature			Month	Day	
Transporter 2 Printed/Typed Name		Signature			Month	Day	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
City's Phone: _____							
Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____							
Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
2.		3.		4.			
Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Signature					Month	Day	
					Year		

delete.

GENERATOR'S INITIAL COPY

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337656 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1	DT	26	T	F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J12347IMDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offeror's Printed/Typed Name Shelly Lam		Signature <i>Shelly Lam</i>		Month 11	Day 13	Year 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name <i>Beelman Trucking Co</i>		Signature <i>[Signature]</i>		Month 11	Day 13	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H075	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 962 425 662		2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337657 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236								
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 000 724 831								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
					No.	Type				
		1. HA3077: HAZARDOUS WASTE SOLID, H.O.S. (P002), 9: PGIII	1	DT	26		F002			
		2.								
		3.								
	4.									
14. Special Handling Instructions and Additional Information 1. 312347 MDL F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLEY LAM ***										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name: <u>Shelley Lam</u> Signature: <u>Shelley Lam</u> Month: <u>11</u> Day: <u>13</u> Year: <u>12</u> 16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____ 17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: <u>L. J. J.</u> Signature: <u>L. J. J.</u> Month: <u>11</u> Day: <u>13</u> Year: <u>12</u> Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____ 18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____ Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) Month: _____ Day: _____ Year: _____ 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. <u>H075</u> 2. _____ 3. _____ 4. _____ 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										
DESIGNATED FACILITY										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337658 JJK			
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
Generator's Phone: (317) 491-4128								
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 000 724 831					
Facility's Phone: (800) 592-5489								
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. NA3077. HAZARDOUS WASTE SOLID, N.O.S. (F002), 9. PGIII		1	DT	26	T	F002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. J12347IMDI / F002 Sol Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offdor's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 11	Day 12	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name BRUCE CLOVER 3069/38817			Signature Bruce Clover			Month 11	Day 12	Year 12
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H075		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337659 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 (800) 592-5489			U.S. EPA ID Number MID 000 724 831				
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, PGIII	1	DT	26	1	P002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J1234 / IMD1 / P002 Sol Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offoror's Printed/Typed Name SHELLY LAM		Signature SHELLY LAM		Month 11	Day 12	Year 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Lester J. Lam		Signature Lester J. Lam		Month 11	Day 12	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H075		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337660 JJK			
		5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 238					
7. Transporter 2 Company Name						U.S. EPA ID Number					
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 000 724 831					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII				1	DT	26	T	F002	
		2.									
		3.									
		4.									
14. Special Handling Instructions and Additional Information 1. J123471MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offeror's Printed/Typed Name Shelly Lam						Signature Shelly Lam			Month Day Year 11/12/12		
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	Transporter signature (for exports only): _____										
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials										
	Transporter 1 Printed/Typed Name Mark Wiese						Signature Mark Wiese			Month Day Year 11/12/12	
	Transporter 2 Printed/Typed Name						Signature			Month Day Year	
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number:										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number										
	Facility's Phone:										
	18c. Signature of Alternate Facility (or Generator)								Month Day Year		
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
	1. H075		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
	Printed/Typed Name						Signature			Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337818 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (F002), 9, PGIII				No.	Type				
		2.									
		3.									
		4.									
14. Special Handling Instructions and Additional Information 1. J123058WV01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month 10	Day 10	Year 12	
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Edw J... 1/5/12 Signature Edw J... Month 1 Day 22 Year 12 Transporter 2 Printed/Typed Name Signature Month Day Year										
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) Month Day Year										
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
	1. H132		2.		3.		4.				
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
	Printed/Typed Name						Signature		Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337819 JJK				
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
				No.	Type				
		1. HAZARDOUS WASTE SOLID, H.O.S., (P002), 9, POI		1	DT	26	1	P002	
		2.							
		3.							
	4.								
14. Special Handling Instructions and Additional Information 1. 3123000V01/ P002 See Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offoror's Printed/Typed Name		Signature				Month Day Year			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:				Date leaving U.S.:			
Transporter signature (for exports only):									
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name		Signature				Month Day Year		
	Transporter 2 Printed/Typed Name		Signature				Month Day Year		
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number				
	Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name		Signature				Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337820 JJK			
		5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 833									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (F002), 9, PGIII				1	DT	26	1	F002	
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information 1. J123058WDI / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name: SHELLY LAM Signature: [Signature] Month: 11 Day: 21 Year: 11											
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials										
TRANSPORTER	Transporter 1 Printed/Typed Name: Richard Mattingly Signature: [Signature] Month: 10 Day: 22 Year: 12										
	Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____										
	Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) _____ Month: _____ Day: _____ Year: _____										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H132				2. _____				3. _____		4. _____	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____											

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337821 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. HAZARDOUS WASTE SOLID, H O 3, (P002), B, PGIII		1	DI	26		F002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information "HAZARDOUS WASTE SOLID MEETING TREATMENT STANDARDS / *** ER CONTACT - SHELLEY LAM ***" Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name Shelley Lam			Signature Shelley Lam			Month 10	Day 22	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name ALLEN WHITE			Signature Allen White			Month 10	Day 22	Year 12
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337822 JJK						
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236												
7. Transporter 2 Company Name		U.S. EPA ID Number												
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633												
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes				
						No.	Type							
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, POIS	1	DT	26	1	F002							
		2.												
		3.												
	4.													
14. Special Handling Instructions and Additional Information 1. J12358WV01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001														
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.														
Generator's/Offor's Printed/Typed Name Shelly Lam										Signature Shelly Lam		Month 10	Day 22	Year 12
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____													
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Richard Beelman Signature Richard Beelman Month 10 Day 22 Year 12 Transporter 2 Printed/Typed Name Signature Month Day Year													
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) Month Day Year													
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.													
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year													

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337823 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 421-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 (800) 592-5489 Facility's Phone:			U.S. EPA ID Number MID 048 090 633				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
	X	1. NA3077 HAZARDOUS WASTE SOLID, N.O.S. (P002), B, PGIII	1	01	26	1	P002
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. 912.0058V01/P002 Sol. inciner. Treatment Standards / *** ER CONTACT - SHELLEY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's Offeror's Printed/Typed Name Shelley Lam		Signature Shelley Lam		Month Day Year 10 24 12			
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____				
	Transporter signature (for exports only):						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Jim Sautkamp	Signature Jim Sautkamp	Month Day Year 10 32 12				
TRANSPORTER	Transporter 2 Printed/Typed Name		Signature	Month Day Year			
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
DESIGNATED FACILITY	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator)						Month Day Year
DESIGNATED FACILITY	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
	1. H132	2.	3.	4.			
DESIGNATED FACILITY	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
	Printed/Typed Name	Signature					Month Day Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337824 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633				
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X 1.	HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII		01		1	F002	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information 1. J12365HNDI / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name		Signature		Month	Day	Year	
SHELLY LAM		[Signature]		10	2	1	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature		Month	Day	Year	
[Signature]		[Signature]		10	22	1	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	H132	2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337825 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	1.	HA3077, HAZARDOUS WASTE SOLID, H.C.S. (P062), 3, POIII		01			P002	
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name SHELLY LAM			Signature [Signature]			Month 10	Day 22	Year 12
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:					
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name Dennis Ebers		Signature [Signature]			Month 10	Day 22	Year 12
	Transporter 2 Printed/Typed Name		Signature			Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number:							
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number				
	Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337826 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 238					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII			DT		T	F002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. J123658WDI / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 10	Day 22	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name KIM STIFF			Signature Kim Stiff			Month 10	Day 22	Year 12
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 497-0980	4. Manifest Tracking Number 010337827 JJK			
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, PGIII			DT		1	F002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 9125588V001 / P002 500 Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offoror's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 10	Day 22	Year 18
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Transporter signature (for exports only): Date leaving U.S.:								
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Chris Mitchell 917 385001 Signature Chris Mitchell Month 10 Day 22 Year 18 Transporter 2 Printed/Typed Name Signature Month Day Year								
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year								

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 602	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337828 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633				
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. HA3077. HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII		01			F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J123858WD1 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Shelly Lam		Signature Shelly Lam		Month 10	Day 22	Year 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name William D Morris		Signature William D Morris		Month 10	Day 22	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____							
18b. Alternate Facility (or Generator) U.S. EPA ID Number _____ Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 602	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337829 JJK				
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
			No.	Type					
	1. HAZARDOUS WASTE SOLID, H.C.S. (F002), 9, POIS			DT			F002		
	2.								
	3.								
4.									
14. Special Handling Instructions and Additional Information F002 Sol Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC Disposal-001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name			Signature			Month		Day	Year
						10		22	12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____									
17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name			Signature			Month		Day	Year
Transporter 2 Printed/Typed Name			Signature			Month		Day	Year
18. Discrepancy									
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number: _____									
18b. Alternate Facility (or Generator) U.S. EPA ID Number									
Facility's Phone: _____									
18c. Signature of Alternate Facility (or Generator) Month Day Year									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name			Signature			Month		Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337830 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		US EPA REGION V		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
Generator's Phone: (317) 491-4128					U.S. EPA ID Number ILR 000 135 236		
6. Transporter 1 Company Name BEELMAN TRUCKING CO					U.S. EPA ID Number		
7. Transporter 2 Company Name					U.S. EPA ID Number		
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111					U.S. EPA ID Number MID 048 090 633		
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (F002), 9, PGIII		DT		1	F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J12365BWD1 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Shelly Lam		Signature Shelly Lam		Month 10	Day 27	Year 17	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Richard J Rensch		Signature Richard J Rensch		Month 10	Day 27	Year 17	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator)		U.S. EPA ID Number					
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 682	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337831 JJK											
	5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128				Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205												
	6. Transporter 1 Company Name BEELMAN TRUCKING CO				U.S. EPA ID Number ILR 000 135 236												
	7. Transporter 2 Company Name				U.S. EPA ID Number												
	8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489				U.S. EPA ID Number MID 048 090 633												
TRANSPORTER	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) 1. HAZARDOUS WASTE SOLID, N.O.S. (P002), 9. PGIII			10. Containers No. Type 1 D1		11. Total Quantity 26	12. Unit Wt./Vol. 1	13. Waste Codes P002								
DESIGNATED FACILITY	14. Special Handling Instructions and Additional Information 1. 4125058V001/P002 Soil Washing Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001																
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.																
	Generator's/Offor's Printed/Typed Name SHELLY LAM				Signature SHELLY LAM				Month 10		Day 20						
	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____																
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Charles R. Bubli 3033/3832										Signature C.R. Bubli		Month 10		Day 22		Year 12
	Transporter 2 Printed/Typed Name				Signature				Month		Day		Year				
DESIGNATED FACILITY	18. Discrepancy																
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number:																
	18b. Alternate Facility (or Generator) U.S. EPA ID Number																
	Facility's Phone:																
	18c. Signature of Alternate Facility (or Generator)								Month		Day		Year				
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)																	
1. H132		2.		3.		4.											
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a																	
Printed/Typed Name				Signature				Month		Day		Year					

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337832 JJK							
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236							
		7. Transporter 2 Company Name						U.S. EPA ID Number							
DESIGNATED FACILITY		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633							
		9a. HM						9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity		12. Unit Wt./Vol.	
TRANSPORTER		1.		HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII		1		DT		26		1		F002	
		2.													
		3.													
		4.													
INT'L		14. Special Handling Instructions and Additional Information 1. J123858W01 / F002 Sol Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001													
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
DESIGNATED FACILITY		Generator's/Officer's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month 10		Day 2		Year 10	
		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.						Port of entry/exit: Date leaving U.S.:							
TRANSPORTER		17. Transporter Acknowledgment of Receipt of Materials													
		Transporter 1 Printed/Typed Name RICHARD A. McDEVITT						Signature Richard A. McDevitt		Month 10		Day 23		Year 12	
DESIGNATED FACILITY		Transporter 2 Printed/Typed Name						Signature		Month		Day		Year	
		18. Discrepancy													
DESIGNATED FACILITY		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection													
		Manifest Reference Number:													
DESIGNATED FACILITY		18b. Alternate Facility (or Generator) U.S. EPA ID Number													
		Facility's Phone:													
DESIGNATED FACILITY		18c. Signature of Alternate Facility (or Generator)													
		Month Day Year													
DESIGNATED FACILITY		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)													
		1. H132				2.				3.				4.	
DESIGNATED FACILITY		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a													
		Printed/Typed Name						Signature		Month		Day		Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0960	4. Manifest Tracking Number 010337723 JJK				
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, POH		10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	1.			/		26		F002	
	2.								
	3.								
	4.								
14. Special Handling Instructions and Additional Information Area: TC-Disposal-001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offeree's Printed/Typed Name			Signature			Month Day Year			
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____						
	Transporter signature (for exports only): _____								
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name			Signature			Month Day Year		
	Transporter 2 Printed/Typed Name			Signature			Month Day Year		
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number: _____								
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number					
	Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)						Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132			2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name			Signature			Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337724 JJK											
		5. Generator's Name and Mailing Address USEPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205											
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236											
		7. Transporter 2 Company Name						U.S. EPA ID Number											
TRANSPORTER		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633											
		9a. HM						9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes			
DESIGNATED FACILITY		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), V. PGIII						1		DT		26		1		F002			
		2.																	
		3.																	
		4.																	
INT'L		14. Special Handling Instructions and Additional Information 1. J123658VWI / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001																	
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.																	
TRANSPORTER		Generator's/Offor's Printed/Typed Name Shelly Lam						Signature Shelly Lam						Month 10		Day 24		Year 12	
		16. International Shipments Transporter signature (for exports only):						<input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____											
DESIGNATED FACILITY		17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Richard Mattingly																	
		Transporter 2 Printed/Typed Name						Signature Richard Mattingly						Month 10		Day 24		Year 12	
DESIGNATED FACILITY		18. Discrepancy																	
		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____																	
DESIGNATED FACILITY		18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____																	
		Facility's Phone: _____																	
DESIGNATED FACILITY		18c. Signature of Alternate Facility (or Generator) _____																	
		Month _____ Day _____ Year _____																	
DESIGNATED FACILITY		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)																	
		1. H132				2.				3.				4.					
DESIGNATED FACILITY		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a																	
		Printed/Typed Name						Signature						Month		Day		Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 882 425 682	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337725 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
GENERATOR ↓	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1.	HA3077 HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1	01	26		F002	
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information *** ER CONTACT - SHELLEY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name		Signature			Month	Day	Year	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:						
Transporter signature (for exports only):		Date leaving U.S.:						
TRANSPORTER ↓	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name		Signature			Month	Day	Year
	Transporter 2 Printed/Typed Name		Signature			Month	Day	Year
DESIGNATED FACILITY ↓	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number:							
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number				
	Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name		Signature			Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 682		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337726 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 230									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII				1	DI	26		F002	
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information 1. J123658W01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLEY LAM *** Area: TC-Disposal 901											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name Signature Month Day Year 10 24 12											
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ Transporter signature (for exports only): _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Year 10 24 12 Transporter 2 Printed/Typed Name Signature Month Day Year										
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number										
	Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H132				2.				3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year											

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337727 JJK						
	5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128				Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
	6. Transporter 1 Company Name BEELMAN TRUCKING CO.				U.S. EPA ID Number ILR 000 135 236							
	7. Transporter 2 Company Name				U.S. EPA ID Number							
	8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489				U.S. EPA ID Number MID 048 090 633							
TRANSPORTER	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) HAZARDOUS WASTE SOLID, N.O.S. (P002), B, POH1			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
	1.				1		26		P002			
	2.											
	3.											
	4.											
DESIGNATED FACILITY	14. Special Handling Instructions and Additional Information Area: TC-Disposal-001											
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
	Generator's/Officer's Printed/Typed Name SHELLY LAM				Signature SHELLY LAM		Month 10		Day 24		Year 12	
	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Mark Wiese Signature Mark Wiese Month 10 Day 24 Year 12 Transporter 2 Printed/Typed Name Signature Month Day Year											
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____											
	18b. Alternate Facility (or Generator) U.S. EPA ID Number											
	Facility's Phone: _____											
	18c. Signature of Alternate Facility (or Generator) Month Day Year											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1. H132 2. 3. 4.												
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year												

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337728 JJK											
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205											
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236											
		7. Transporter 2 Company Name						U.S. EPA ID Number											
DESIGNATED FACILITY		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633											
TRANSPORTER		9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes					
								No. Type											
		X 1.		NA3077, HAZARDOUS WASTE SOLID, N.O.S., (F002), 9, PGIII				1		DT		26		F002					
		2.																	
		3.																	
INT'L		4.																	
DESIGNATED FACILITY		14. Special Handling Instructions and Additional Information 1. J123658W01 / F002 Sol Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001																	
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.																	
TRANSPORTER		Generator's/Offor's Printed/Typed Name Shelly Lam						Signature Shelly Lam						Month 10		Day 24		Year 12	
		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____																	
DESIGNATED FACILITY		17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Allen Wittle																	
		Transporter 2 Printed/Typed Name						Signature Allen Wittle						Month 10		Day 24		Year 12	
DESIGNATED FACILITY		18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____																	
		18b. Alternate Facility (or Generator) U.S. EPA ID Number _____ Facility's Phone: _____																	
DESIGNATED FACILITY		18c. Signature of Alternate Facility (or Generator) _____ Month Day Year																	
		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.																	
DESIGNATED FACILITY		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month Day Year																	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337729 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. HAZARDOUS WASTE SOLID H.O.S. (P002), 9. PGIII		1	01	26	1	P002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. 11/30/97/11/1002 Sol Resolving Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 11	Day 24	Year 97
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name Steve Pritchett			Signature Steve Pritchett			Month 10	Day 24	Year 97
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337730 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
		6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 236			
		7. Transporter 2 Company Name						U.S. EPA ID Number			
		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
					No.	Type					
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (P002), 9 PGIII				1	DT	26		F002	
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information 1. J123658W01/F002 Soil Meeting Treatment Standards / *** ER CONTACT: SHELLY LAM *** Area: TC-Disposal-001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name: <u>Shelly Lam</u> Signature: <u>Shelly Lam</u> Month: <u>11</u> Day: <u>18</u> Year: <u>12</u>											
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ Transporter signature (for exports only): _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: <u>Dennis Edens</u> Signature: <u>Dennis Edens</u> Month: <u>10</u> Day: <u>24</u> Year: <u>12</u> Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										
TRANSPORTER	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number _____ Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) _____ Month: _____ Day: _____ Year: _____										
DESIGNATED FACILITY	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. <u>H132</u> 2. _____ 3. _____ 4. _____										
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337731 JJK			
	5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
	6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
	7. Transporter 2 Company Name			U.S. EPA ID Number					
TRANSPORTER	8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	1.	HA3077, HAZARDOUS WASTE SOLID, N.O.S. (P002), B, PGIII		1		DT	26	1	P002
	2.								
DESIGNATED FACILITY	14. Special Handling Instructions and Additional Information 1. 3125050W/R/T P002 J003 Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area TC-Disposal-001								
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
	Generator's/Offeror's Printed/Typed Name SHELLY LAM			Signature SHELLY LAM			Month Day Year 10/24/12		
	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
DESIGNATED FACILITY	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name RAY STIFF			Signature RAY STIFF			Month Day Year 10/24/12		
	Transporter 2 Printed/Typed Name			Signature			Month Day Year		
	18. Discrepancy								
DESIGNATED FACILITY	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number: _____								
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number					
	Facility's Phone: _____								
DESIGNATED FACILITY	18c. Signature of Alternate Facility (or Generator)			Month Day Year					
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
	1. H132		2.		3.		4.		
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator ID Number IND 982 425 682	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337732 JJK					
	5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
	Generator's Phone: (317) 491-4128								
	6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 238						
	7. Transporter 2 Company Name		U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111				U.S. EPA ID Number MID 048 090 633					
Facility's Phone: (800) 592-5489									
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (P002), 9, PGIII		1		26	1	P002		
	2.								
	3.								
	4.								
14. Special Handling Instructions and Additional Information 1. 312658WDT / P002 Soil Meeting Treatment Standards / *** ER-CONTACT - SHELLY LAM *** Area: TC-Disposal-001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 10	Day 24	Year 12	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:						
	Transporter signature (for exports only):								
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name Chris Nitch			Signature Chris Nitch			Month 10	Day 24	Year 12
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
	18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number:									
18b. Alternate Facility (or Generator)						U.S. EPA ID Number			
Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)							Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132			2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name			Signature			Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 882	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337733 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 238					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. HAZARDOUS WASTE SOLID, H.O.S. (P002) 9, POIII		1	01	26		P002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. 3125088V001 P002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generators/Offeror's Printed/Typed Name Shelly Lam			Signature [Signature]			Month 10	Day 27	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name Robert J. Lyle			Signature [Signature]			Month 10	Day 27	Year 12
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number: _____								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM Generator ID Number 882 425 662		2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 01033773 JJK	
ATTN: M 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
Generator's Phone: (317) 491-4128					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236		
7. Transporter 2 Company Name			U.S. EPA ID Number		
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633		
Facility's Phone: (800) 592-5489					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity
			No.	Type	12. Unit Wt./Vol.
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1	D1	26
		2.			
		3.			
		4.			
13. Waste Codes					
14. Special Handling Instructions and Additional Information 1. J123858WDI / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001					
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.					
Generator's/Offor's Printed/Typed Name		Signature		Month	Day
				11	29
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____				
	17. Transporter Acknowledgment of Receipt of Materials				
TRANSPORTER	Transporter 1 Printed/Typed Name		Signature		Month
	RICHARD J. McDEVITT				10
	Transporter 2 Printed/Typed Name		Signature		Month
					12
DESIGNATED FACILITY	18. Discrepancy				
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection				
	Manifest Reference Number:				
	18b. Alternate Facility (or Generator)		U.S. EPA ID Number		
	Facility's Phone:				
	18c. Signature of Alternate Facility (or Generator)				Month
					Day
					Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)					
1. H132		2.		3.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a					
Printed/Typed Name		Signature		Month	Day
				Year	

GENERATOR ↓ INT'L ↓ TRANSPORTER ↓ DESIGNATED FACILITY ↓	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337735 JJK				
	5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
	6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236						
	7. Transporter 2 Company Name						U.S. EPA ID Number						
	8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633						
9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes	
						No. Type							
		1. HA3077 HAZARDOUS WASTE SOLID, N.O.S. (P002), 0, PGIII				1		26					
		2.											
		3.											
		4.											
14. Special Handling Instructions and Additional Information 1-4123058W017 P002 Sub Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal 001													
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
Generator's/Officer's Printed/Typed Name						Signature				Month Day Year 10 24 12			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____													
17. Transporter Acknowledgment of Receipt of Materials													
Transporter 1 Printed/Typed Name						Signature				Month Day Year 10 24 12			
Transporter 2 Printed/Typed Name						Signature				Month Day Year			
18. Discrepancy													
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection													
Manifest Reference Number: _____													
18b. Alternate Facility (or Generator) U.S. EPA ID Number													
Facility's Phone: _____													
18c. Signature of Alternate Facility (or Generator) Month Day Year													
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)													
1. H132				2.				3.				4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a													
Printed/Typed Name						Signature				Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337736 JJK				
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
		6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 236				
		7. Transporter 2 Company Name						U.S. EPA ID Number				
		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MI0 048 090 633				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
						No.	Type					
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), B, PGIII				1	D1	26		F002		
		2.										
		3.										
	4.											
14. Special Handling Instructions and Additional Information 1123658W01 / F002 Soil Mixing Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generators/Offeror's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month Day Year 10 24 12				
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name William Morris						Signature William Morris		Month Day Year 10 24 12			
	Transporter 2 Printed/Typed Name						Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number:											
	18b. Alternate Facility (or Generator) U.S. EPA ID Number											
	Facility's Phone:											
	18c. Signature of Alternate Facility (or Generator) Month Day Year											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
	1. H132			2.			3.			4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name						Signature		Month Day Year				

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417 0980	4. Manifest Tracking Number 010337737 JJK				
	5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491 4128				Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
	6. Transporter 1 Company Name BEELMAN TRUCKING CO.				U.S. EPA ID Number ILR 000 135 236					
	7. Transporter 2 Company Name				U.S. EPA ID Number					
	8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489				U.S. EPA ID Number MID 048 090 633					
TRANSPORTER	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) 1. HAZARDOUS WASTE SOLID, N.O.S. (P002); B. POH			10. Containers No. Type 1 DT		11. Total Quantity 26	12. Unit Wt./Vol. 1	13. Waste Codes P002	
DESIGNATED FACILITY	14. Special Handling Instructions and Additional Information 1. 312563VLR/P002 Sub Meeting Treatment Standards / *** ER CONTACT- SHELLY LAM *** Area: TC Disposal-001									
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
	Generator's/Offor's Printed/Typed Name SHELLY LAM				Signature [Signature]				Month Day Year 10 09 10	
	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Richard J Benck Signature [Signature] Month Day Year 10 09 10 Transporter 2 Printed/Typed Name Signature Month Day Year									
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number									
	Facility's Phone: _____									
	18c. Signature of Alternate Facility (or Generator) Month Day Year									
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.									
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337833 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
		1. HAZARDOUS WASTE SOLID, H.O.S. (F002) 9. PGIII	1	01	26		F002	
		2.						
		3.						
		4.						
14. Special Handling Instructions and Additional Information "112300V001/F002 Site Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM ***" Area: TC-Disposal 001.								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generators/Offeror's Printed/Typed Name		Signature		Month		Day	Year	
				10		25	12	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____					
	Transporter signature (for exports only):							
	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name	Signature		Month		Day	Year	
				10		25	12	
	Transporter 2 Printed/Typed Name	Signature		Month		Day	Year	
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number: _____							
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number				
	Facility's Phone: _____							
	18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
	1. H132	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name		Signature		Month		Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 682	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337834 JJK				
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633						
GENERATOR ↑ ↓	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	X 1.	HA3077, HAZARDOUS WASTE SOLID, R.O.S. (F002), 9, PGIII	1	DT	26	1	F002		
	2.								
	3.								
	4.								
14. Special Handling Instructions and Additional Information T: 3123658VMD1 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name		Signature				Month	Day	Year	
16. International Shipments		<input type="checkbox"/> Import to U.S.		<input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____			
TRANSPORTER ↑ ↓	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name		Signature				Month	Day	Year
	Transporter 2 Printed/Typed Name		Signature				Month	Day	Year
DESIGNATED FACILITY ↑ ↓	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number: _____								
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number				
	Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name		Signature				Month	Day	Year	

690

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-9980	4. Manifest Tracking Number 010337835 JJK			
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 238					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. HAZARDOUS WASTE SOLID, N.O.S. (P002), B, POH		1	DT	26	1	P002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. 91230500V001 P002 Solid Recyng Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offero's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 11	Day 20	Year 2013
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Richard Mattingly Signature Richard Mattingly Month 10 Day 20 Year 2012 Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____								
18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____ Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.								
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____								

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337836 JJK			
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name DEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII		1	DT	20	1	F002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. J123080V01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name Shelly Lam			Signature [Signature]			Month 11	Day 1	Year 98
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name RILEY WITTE			Signature [Signature]			Month 12	Day 12	Year 98
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number: _____								
18b. Alternate Facility (or Generator)						U.S. EPA ID Number		
Facility's Phone: _____								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337837 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
		6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 236			
		7. Transporter 2 Company Name						U.S. EPA ID Number			
		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 43350 N L-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
		1. HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, POIS				1	01	26		P002	
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information 1. 43350 N L-94 Service Drive Area: TC-Disposal-001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offeree's Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____											
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____ Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										
DESIGNATED FACILITY	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number _____										
	Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) _____ Month: _____ Day: _____ Year: _____										
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____											

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337838 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
Generator's Phone: (317) 491-4128			U.S. EPA ID Number ILR 000 135 236					
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I 94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, PGIII		1	D1	26	1	F002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. 312385WV01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT: SHELLY LAM *** Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name			Signature			Month	Day	Year
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit:			Date leaving U.S.:		
Transporter signature (for exports only):								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name			Signature			Month	Day	Year
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator)						U.S. EPA ID Number		
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 602	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337839 JJK			
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. HAZARDOUS WASTE SOLID, H.O.S. (P002), 9-PGIII		1	DI	26	1	P002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information Area: TC-Disposal-001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name			Signature			Month	Day	Year
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit:					
Transporter signature (for exports only):			Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials			Signature			Month	Day	Year
Transporter 1 Printed/Typed Name			Signature			Month	Day	Year
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection			Manifest Reference Number:					
18b. Alternate Facility (or Generator)			U.S. EPA ID Number					
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H132			2.		3.	4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337840 JJK					
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205								
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
					No.	Type						
		1. HAZARDOUS WASTE SOLID, N.O.S. (H002), 9, PGIII	1	DT	26	1	H002					
		2.										
		3.										
	4.											
14. Special Handling Instructions and Additional Information 1123658V001 / 1102 Sol Mining Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Offor's Printed/Typed Name					Signature		Month		Day Year			
							10		3 12			
TRANSPORTER	16. International Shipments: <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Date leaving U.S.:											
	Transporter signature (for exports only):											
	17. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name					Signature		Month		Day Year		
	Mark Wiese					Mark Wiese		10		23 12		
	Transporter 2 Printed/Typed Name					Signature		Month		Day Year		
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number:											
	18b. Alternate Facility (or Generator) U.S. EPA ID Number											
	Facility's Phone:											
	18c. Signature of Alternate Facility (or Generator)								Month		Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1. H132			2.			3.			4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name					Signature		Month		Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 062	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337841 JJK					
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 238							
7. Transporter 2 Company Name			U.S. EPA ID Number							
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
			No.	Type						
	1. HAZARDOUS WASTE SOLID, N.O.S. (P002), 9. PGIII		1	DI	26		P002			
	2.									
	3.									
4.										
14. Special Handling Instructions and Additional Information Area: TC-Disposal 001										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name			Signature			Month	Day	Year		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit:			Date leaving U.S.:				
Transporter signature (for exports only):										
17. Transporter Acknowledgment of Receipt of Materials										
Transporter 1 Printed/Typed Name			Signature			Month	Day	Year		
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year		
18. Discrepancy										
18a. Discrepancy Indication Space		<input type="checkbox"/> Quantity	<input type="checkbox"/> Type	<input type="checkbox"/> Residue	<input type="checkbox"/> Partial Rejection	<input type="checkbox"/> Full Rejection				
				Manifest Reference Number:						
18b. Alternate Facility (or Generator)			U.S. EPA ID Number							
Facility's Phone:										
18c. Signature of Alternate Facility (or Generator)								Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. H132		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name			Signature			Month	Day	Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337842 JJK							
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236							
		7. Transporter 2 Company Name						U.S. EPA ID Number							
DESIGNATED FACILITY		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633							
		9a. HM						9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity		12. Unit Wt./Vol.	
TRANSPORTER		1.		HAZARDOUS WASTE SOLID; H.O.S. (P002); 9, PGIII		1		01		26		1		F002	
		2.													
		3.													
		4.													
DESIGNATED FACILITY		14. Special Handling Instructions and Additional Information 1. J123656VND1 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area TC-Disposal-001													
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
		Generator's/Offeror's Printed/Typed Name Shelly Lam						Signature Shelly Lam				Month Day Year 12 2 12			
		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____													
TRANSPORTER		17. Transporter Acknowledgment of Receipt of Materials													
		Transporter 1 Printed/Typed Name L. B. B. 304/57						Signature L. B. B.				Month Day Year 12 2 12			
DESIGNATED FACILITY		Transporter 2 Printed/Typed Name						Signature				Month Day Year			
		18. Discrepancy													
DESIGNATED FACILITY		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection													
		Manifest Reference Number:													
		18b. Alternate Facility (or Generator)						U.S. EPA ID Number							
		Facility's Phone:													
DESIGNATED FACILITY		18c. Signature of Alternate Facility (or Generator)													
		Month Day Year													
DESIGNATED FACILITY		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)													
		1. H132		2.		3.		4.							
DESIGNATED FACILITY		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a													
		Printed/Typed Name						Signature				Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 602		2. Page 1 of 1		3. Emergency Response Phone (317) 417 0980		4. Manifest Tracking Number 010337843 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ALIN SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 238									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
		1. HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, POIS				1	DT	26			
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information "HAZARDOUS WASTE TREATMENT STANDARDS / "ER CONTACT - SHELLEY LAM" Area: TC-Disposal-001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____											
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ Transporter signature (for exports only): _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____ Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number _____ Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) _____ Month: _____ Day: _____ Year: _____										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H132			2.			3.			4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____											

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 682	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0080	4. Manifest Tracking Number 010337844 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633				
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (F002), 9, PGIII	1		26	1	1002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J123658WD17 F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Shelly Lam		Signature [Signature]		Month 11	Day 23	Year 1997	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name RAY STIFF		Signature [Signature]		Month 10	Day 23	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337845 JJK				
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 833						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
			No.	Type					
	1.	HAZARDOUS WASTE SOLID, H.O.S., (P002) 8, POH1	1	DT	26	1	P002		
	2.								
	3.								
	4.								
14. Special Handling Instructions and Additional Information 1. 312,056,000 / P002 and Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name Shelly Lam		Signature Shelly Lam		Month 12		Day 17			
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____						
	Transporter signature (for exports only):								
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials		Signature Chris Metcher		Month 10		Day 26		
	Transporter 1 Printed/Typed Name Chris Metcher 917 30009		Signature		Month		Day		
DESIGNATED FACILITY	18. Discrepancy							Year	
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection		Manifest Reference Number:						
DESIGNATED FACILITY	18b. Alternate Facility (or Generator)		U.S. EPA ID Number						
	Facility's Phone:								
DESIGNATED FACILITY	18c. Signature of Alternate Facility (or Generator)		Month					Day	
								Year	
DESIGNATED FACILITY	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
	1. H132	2.	3.	4.					
DESIGNATED FACILITY	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
	Printed/Typed Name		Signature		Month		Day		
								Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337846 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I 94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. HAZARDOUS WASTE SOLID, N.O.S., (H002) 9, PGIII	1		26	1	F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. 3123650W01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Shelly Lam		Signature Shelly Lam		Month 10	Day 23	Year 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Richard A. McDevitt		Signature Richard A. McDevitt		Month 10	Day 23	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337847 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111		U.S. EPA ID Number MID 048 090 633					
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. HAZARDOUS WASTE SOLID, FLUO, (F002), 9, PGIII		01		1	F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1123558V01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Shelly Lam		Signature Shelly Lam			Month 10	Day 23	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:			Year 12		
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Charles P. Bublis 3033/38823		Signature C.P. Bublis			Month 10	Day 23	
Transporter 2 Printed/Typed Name		Signature			Year 12		
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature			Month	Day	
					Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 882		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337848 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I 94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
		1. HAZARDOUS WASTE SOLID, N.O.S. (H002), 9, PG01				1	BT	26		F002	
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information 1. 9123858W017 F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLEY LAM *** Area: TC-Disposal-001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name: _____ Signature: _____ Month: 10 Day: 25 Year: 12											
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	Transporter signature (for exports only): _____										
	17. Transporter Acknowledgment of Receipt of Materials										
	Transporter 1 Printed/Typed Name: _____ Signature: _____ Month: 1 Day: 25 Year: 12										
	Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: Day: Year:										
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____										
	Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) _____ Month: Day: Year:										
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
	1. H132		2.		3.		4.				
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
	Printed/Typed Name: _____ Signature: _____ Month: Day: Year:										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337849 JJK			
		5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4491 N KEYSTONE INDIANAPOLIS, IN 46205			
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236			
		7. Transporter 2 Company Name						U.S. EPA ID Number			
TRANSPORTER INT'L		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633			
		9a. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))						10. Containers		11. Total Quantity	
DESIGNATED FACILITY		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))						12. Unit Wt./Vol.		13. Waste Codes	
		1. HAZARDOUS WASTE SOLID: H.O.S. (P002); B. PGIII						1		20	
DESIGNATED FACILITY		14. Special Handling Instructions and Additional Information 1. 912,055,000/1 P002 Sol. Residue Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001									
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
TRANSPORTER INT'L		Generator's/Officer's Printed/Typed Name SHELLY LAM						Signature SHELLY LAM		Month Day Year 10 1 12	
		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____									
TRANSPORTER INT'L		17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Richard Mattingly						Signature Richard Mattingly		Month Day Year 10 25 12	
		Transporter 2 Printed/Typed Name						Signature		Month Day Year	
DESIGNATED FACILITY		18. Discrepancy									
		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
DESIGNATED FACILITY		18b. Alternate Facility (or Generator)						U.S. EPA ID Number			
		Facility's Phone: _____									
DESIGNATED FACILITY		18c. Signature of Alternate Facility (or Generator)						Month Day Year			
		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
DESIGNATED FACILITY		1. H132		2.		3.		4.			
		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in item 18a									
DESIGNATED FACILITY		Printed/Typed Name						Signature		Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337850 JJK					
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236											
7. Transporter 2 Company Name		U.S. EPA ID Number											
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 990 633											
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
						No.	Type						
	X	1. HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, POH				1	DT	20			F002		
		2.											
		3.											
	4.												
14. Special Handling Instructions and Additional Information 1. J12:1658WDT / F002 508 Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001													
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
Generator's/Officer's Printed/Typed Name Shelly Lam						Signature <i>[Signature]</i>		Month Day Year 10 2 12					
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____												
	17. Transporter Acknowledgment of Receipt of Materials												
TRANSPORTER	Transporter 1 Printed/Typed Name DAN BERNATHY						Signature <i>[Signature]</i>		Month Day Year 10 25 12				
	Transporter 2 Printed/Typed Name						Signature		Month Day Year				
DESIGNATED FACILITY	18. Discrepancy												
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____												
	18b. Alternate Facility (or Generator) U.S. EPA ID Number _____ Facility's Phone: _____												
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year												
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
	1. H132		2.		3.		4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a													
Printed/Typed Name						Signature		Month Day Year					

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417 0980	4. Manifest Tracking Number 01.0337851 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I 94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1.	HA3077: HAZARDOUS WASTE SOLID, N.O.S. (P002), P. PG01	1	DT	26		P002	
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information 1. 3123058V017 P002 Sub Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal 001								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name		Signature			Month	Day	Year	
Jenny Lam		[Signature]			12	12	12	
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____					
	Transporter signature (for exports only):							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name		Signature			Month	Day	Year
	Dennis Elders		[Signature]			10	25	12
	Transporter 2 Printed/Typed Name		Signature			Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number: _____							
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number				
	Facility's Phone: _____							
	18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
	1. H132	2.	3.	4.				
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
	Printed/Typed Name		Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 667		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337852 JJK							
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236													
7. Transporter 2 Company Name		U.S. EPA ID Number													
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633													
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes					
						No.	Type								
	X	1. HA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII				1	D1	26	1	F002					
		2.													
		3.													
	4.														
14. Special Handling Instructions and Additional Information 1. 3123958WDR / F002 Soil Meeting Treatment Standards / *** ER CONTACT SHELLY LAM *** Area: TC-Disposal-001															
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.															
Generator's/Offor's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month 10		Day 25					
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____															
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials														
	Transporter 1 Printed/Typed Name RAY STIFF						Signature Ray Stiff		Month 10		Day 25				
	Transporter 2 Printed/Typed Name						Signature		Month		Day				
DESIGNATED FACILITY	18. Discrepancy														
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection														
	Manifest Reference Number: _____														
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number								
	Facility's Phone: _____														
	18c. Signature of Alternate Facility (or Generator)														
	Month Day Year														
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)															
1. H132				2.				3.				4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a															
Printed/Typed Name						Signature		Month		Day					

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337853 JJK				
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I 94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 048 090 633						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
			No.	Type					
		1. HAZARDOUS WASTE SOLID, H.O.S. (P002), B. P001	1	DI	76		1002		
		2.							
		3.							
		4.							
14. Special Handling Instructions and Additional Information 112-000001 / 1002 Can Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: 1C-Disposal-001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name			Signature			Month	Day	Year	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit:			Date leaving U.S.:			
Transporter signature (for exports only):									
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name			Signature			Month	Day	Year
	Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number					
	Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name			Signature			Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337854 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I 94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 000 633				
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1		26	1	F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. 312365BWD01 / F002 Soil Meeting Treatment Standards / *** ER CONTACT: SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generators/Offeror's Printed/Typed Name Shelly Lam		Signature Shelly Lam		Month 10	Day 25	Year 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name Robert Wayne		Signature Robert Wayne		Month 10	Day 25	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417 0980		4. Manifest Tracking Number 010337855 JJK									
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205									
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236									
		7. Transporter 2 Company Name						U.S. EPA ID Number									
TRANSPORTER		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633									
		9a. HM						9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes	
DESIGNATED FACILITY		1.		HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, PGIII		1		Type		76							
		2.															
		3.															
		4.															
INT'L		14. Special Handling Instructions and Additional Information 1. 312.30.50.017 P002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLEY LAM *** Area: TC-Disposal-001															
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.															
		Generator's/Offor's Printed/Typed Name Signature Month Day Year 10 23 12															
		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____															
DESIGNATED FACILITY		17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Year 10 23 12 Transporter 2 Printed/Typed Name Signature Month Day Year															
		18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____															
		18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: _____															
		18c. Signature of Alternate Facility (or Generator) Month Day Year															
DESIGNATED FACILITY		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.															
		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year															

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 882	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337738 JJK	
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
Generator's Phone: (317) 491-4128						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MIC 048 090 633			
Facility's Phone: (800) 592-5489						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. NA3077 HAZARDOUS WASTE SOLID, N.O.S. (H002) 9, POIS	1		26		F002
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information 1. J123656WDL/F002 Soil Meeting Treatment Standards / *** ER CONTACT: SHELLY LAM *** Area: TC-Disposal-001						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name		Signature		Month Day Year		
BRYAN HECK		Bry Heck		11 1 12		
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name		Signature		Month Day Year		
BRYAN HECK		Bry Heck		11 1 12		
Transporter 2 Printed/Typed Name		Signature		Month Day Year		
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H132		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337739 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 238				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 (800) 592-5489			U.S. EPA ID Number MID 048 090 633				
Facility's Phone:							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (F002), B. POH	1	01	26		F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J125030V01/F002 Soil Washing Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal 001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name		Signature		Month	Day	Year	
SHELLY LAM		[Signature]		11	1	13	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature		Month	Day	Year	
JIM S. AKA...		[Signature]		11	1	13	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1.	H132	2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337740 JJK	
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
Generator's Phone: (317) 491-4128						
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 633			
Facility's Phone: (800) 582-5489						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
X	1. HA3077 HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, PC01	1	DT	26	1	P002
	2.					
	3.					
	4.					
14. Special Handling Instructions and Additional Information 1. 2125559W03 / P002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Attn: TC-Disposal-001						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offor's Printed/Typed Name SHELLY LAM		Signature [Signature]		Month 11	Day 11	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Richard Mathingly		Signature [Signature]		Month 11	Day 11	Year 12
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number:						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone:						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H132	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337741 JJK				
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 (800) 582-5489		U.S. EPA ID Number MID 048 090 633										
Facility's Phone:												
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) HA307 HAZARDOUS WASTE SOLID, N.O.S. (1662), 9, POH				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	1.					1		26		1002		
	2.											
	3.											
	4.											
14. Special Handling Instructions and Additional Information Area: TC-Disposal-001												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Officer's Printed/Typed Name SHELLY LAM						Signature <i>[Signature]</i>		Month Day Year 11 11 11				
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials											
DESIGNATED FACILITY	Transporter 1 Printed/Typed Name BEELMAN TRUCKING CO.						Signature <i>[Signature]</i>		Month Day Year 11 11 11			
	Transporter 2 Printed/Typed Name						Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number: _____											
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number					
	Facility's Phone:											
DESIGNATED FACILITY	18c. Signature of Alternate Facility (or Generator)								Month Day Year			
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
	1. H132		2.		3.		4.					
DESIGNATED FACILITY	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
	Printed/Typed Name						Signature		Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417 0980	4. Manifest Tracking Number 010337742 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 238					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N 194 SERVICE DRIVE BELLEVILLE, MI 48111		U.S. EPA ID Number MID 048 090 633					
Facility's Phone: (800) 562-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1		26		F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J123850WDT/F002 Sol Meeting Treatment Standards / *** ER CONTACT- SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name		Signature			Month	Day Year	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:					
Transporter signature (for exports only):		Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials		Signature			Month	Day Year	
Transporter 1 Printed/Typed Name		Signature			Month	Day Year	
Transporter 2 Printed/Typed Name		Signature			Month	Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.	4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature			Month	Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417 0980	4. Manifest Tracking Number 010337743 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111		U.S. EPA ID Number MID 048 090 633					
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. HA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1	01	26		F002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name		Signature			Month	Day Year	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:			Date leaving U.S.:		
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name		Signature			Month	Day Year	
Transporter 2 Printed/Typed Name		Signature			Month	Day Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)					Month	Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature			Month	Day Year	

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 882		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337744 JJK									
	5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205											
	6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 236											
	7. Transporter 2 Company Name						U.S. EPA ID Number											
	8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MO 64811 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633											
TRANSPORTER	9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes					
							No. Type											
			1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII				1		26				F002					
			2.															
			3.															
DESIGNATED FACILITY	14. Special Handling Instructions and Additional Information 1. J123858WDI / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLEY LAM *** Area: TC-Disposal-001																	
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.																	
	Generator's/Offor's Printed/Typed Name SHELLEY LAM										Signature [Signature]		Month 11		Day 11		Year 12	
	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____																	
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name RICHARD A. McDEVITT Signature Richard A. McDevitt Month 11 Day 11 Year 12 Transporter 2 Printed/Typed Name Signature Month Day Year																	
DESIGNATED FACILITY	18. Discrepancy																	
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____																	
	18b. Alternate Facility (or Generator) U.S. EPA ID Number																	
	Facility's Phone: _____																	
	18c. Signature of Alternate Facility (or Generator) Month Day Year																	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)																		
1. H132				2.				3.				4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year																		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337746 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 238					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111		U.S. EPA ID Number MID 048 090 633					
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
x	1. HA3077, HAZARDOUS WASTE SOLID, N.O.S. (P002); 9, PGIII	1	DT	26	1	P002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. J123650V01 / P002 55a Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name SHELLY LAM		Signature [Signature]		Month 11	Day 1	Year 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name [Name]		Signature [Signature]		Month 11	Day 1	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337747 JJK					
	5. Generator's Name and Mailing Address USE EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128				Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
	6. Transporter 1 Company Name BEELMAN TRUCKING CO.				U.S. EPA ID Number ILR 000 135 236						
	7. Transporter 2 Company Name				U.S. EPA ID Number						
TRANSPORTER	8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489				U.S. EPA ID Number MID 048 090 633						
	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	1.	HAZARDOUS WASTE SOLID, N.O.S. (P002), B. POH			1		26		P002		
	2.										
DESIGNATED FACILITY	14. Special Handling Instructions and Additional Information 1. H132 SOLID / P002 SOLID Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal 001										
	15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
	Generator's/Offor's Printed/Typed Name Shelly Lam				Signature Shelly Lam		Month Day Year 11 1 12				
	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Transporter signature (for exports only): 17. Transporter Acknowledgment of Receipt of Materials				Port of entry/exit: Date leaving U.S.:						
DESIGNATED FACILITY	Transporter 1 Printed/Typed Name William Morris				Signature William Morris		Month Day Year 11 1 12				
	Transporter 2 Printed/Typed Name				Signature		Month Day Year				
	18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number:										
	18b. Alternate Facility (or Generator) Facility's Phone:				U.S. EPA ID Number						
DESIGNATED FACILITY	18c. Signature of Alternate Facility (or Generator)						Month Day Year				
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
	1. H132		2.		3.		4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name								Signature		Month Day Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337748 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 048 090 633									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII				1		DT	26	1	F002
		2.									
		3.									
		4.									
14. Special Handling Instructions and Additional Information E 3123958WDL / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offeror's Printed/Typed Name SHELLY LAM						Signature [Signature]		Month 11	Day 2	Year 12	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials										
TRANSPORTER	Transporter 1 Printed/Typed Name DANIEL J. LAM						Signature [Signature]		Month 11	Day 3	Year 12
	Transporter 2 Printed/Typed Name						Signature		Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number _____ Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____										
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
	1. H132		2.		3.		4.				
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337749 JJK	
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 238			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 (800) 592-5489			U.S. EPA ID Number MID 048 090 633			
Facility's Phone:						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
		No.	Type			
1.	HAZARDOUS WASTE SOLID, N.O.S. (P002), 8, PGIII	1	DT	26	1	P002
2.						
3.						
4.						
14. Special Handling Instructions and Additional Information *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generator's/Offero's Printed/Typed Name SHELLY LAM		Signature <i>[Signature]</i>		Month 11	Day 6	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____						
17. Transporter Acknowledgment of Receipt of Materials						
Transporter 1 Printed/Typed Name Jim Schatzman		Signature <i>[Signature]</i>		Month 11	Day 9	Year 12
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year
18. Discrepancy						
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
Manifest Reference Number: _____						
18b. Alternate Facility (or Generator) U.S. EPA ID Number						
Facility's Phone: _____						
18c. Signature of Alternate Facility (or Generator) Month Day Year						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H132	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417 0980	4. Manifest Tracking Number 010337750 JJK		
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLEY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 238				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 048 090 833				
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
X	1. NA3077, HAZARDOUS WASTE SOLID, H.O.S. (1002), 9, PGIII	1		26		1002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information 1. 3123650WDI/1002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLEY LAM *** Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Officer's Printed/Typed Name Shelley Lam		Signature Shelley Lam		Month 11	Day 2	Year 12	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name T. Kay Newington		Signature T. Kay Newington		Month 11	Day 2	Year 12	
Transporter 2 Printed/Typed Name		Signature		Month	Day	Year	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 082 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417 0980	4. Manifest Tracking Number 010337751 JJK		
5. Generator's Name and Mailing Address USE EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
Generator's Phone: (317) 491-4128							
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 238					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111		U.S. EPA ID Number MID 043 000 633					
Facility's Phone: (800) 592-5489							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
1.	HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, POIS	1	51	26	1	F002	
2.							
3.							
4.							
14. Special Handling Instructions and Additional Information Area: TC-Disposal-001							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name SHELLY LAM		Signature [Signature]		Month Day Year 11 7 12			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____							
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name RANDALL S. BROWN		Signature [Signature]		Month Day Year 11 2 12			
Transporter 2 Printed/Typed Name		Signature		Month Day Year			
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number: _____							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone: _____							
18c. Signature of Alternate Facility (or Generator) Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H132	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month Day Year			

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 682		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337752 JJK				
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 238				
		7. Transporter 2 Company Name						U.S. EPA ID Number				
		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I 94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633				
GENERATOR		9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
						No. Type						
		1. HAZARDOUS WASTE SOLID, N.O.S. (F002), 9. PGIII		1		01		26		F002		
		2.										
		3.										
4.												
INT'L		14. Special Handling Instructions and Additional Information 1. J123658WVH / F002 Soil Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC-Disposal-001										
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
TRANSPORTER		Generator's/Offoror's Printed/Typed Name Shelly Lam						Signature [Signature]		Month Day Year 11 2 12		
		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
DESIGNATED FACILITY		17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name DIN 15310470 Signature [Signature] Month Day Year 11 2 12 Transporter 2 Printed/Typed Name Signature Month Day Year										
		18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) U.S. EPA ID Number Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) Month Day Year										
DESIGNATED FACILITY		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H132 2. 3. 4.										
		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417 0980	4. Manifest Tracking Number 010337753 JJK				
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC. 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (300) 592-5489			U.S. EPA ID Number MID 048 090 633						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
	X	1. HA3077, HAZARDOUS WASTE SOLID, H.C.S. (F002), 9, POIII	1	01	26	1	F002		
		2.							
		3.							
		4.							
14. Special Handling Instructions and Additional Information 1. 3123658V0017 F002 Sol Mining Treatment Standards / *** ER CONTACT - SHELLY LAM *** Area: TC Disposal 001									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name SHELLY LAM			Signature SHELLY LAM			Month 11	Day 2	Year 12	
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: _____ Date leaving U.S.: _____					
	Transporter signature (for exports only): _____								
DESIGNATED FACILITY	17. Transporter Acknowledgment of Receipt of Materials								
	Transporter 1 Printed/Typed Name RICHARD A. McDEVITT			Signature Richard A. McDevitt			Month 11	Day 2	Year 12
	Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
	18. Discrepancy								
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
	Manifest Reference Number:								
	18b. Alternate Facility (or Generator)			U.S. EPA ID Number					
	Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name			Signature			Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337720 JJK							
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 236							
		7. Transporter 2 Company Name						U.S. EPA ID Number							
DESIGNATED FACILITY		8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 582-5489						U.S. EPA ID Number MID 000 724 831							
TRANSPORTER		9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes			
						No. Type									
		X		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII		1 DT		26		1		F002			
				2.											
				3.											
INT'L				4.											
DESIGNATED FACILITY		14. Special Handling Instructions and Additional Information 1. 312347 (MDI) / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***													
		15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
TRANSPORTER		Generator's/Offor's Printed/Typed Name Shelly Lam						Signature [Signature]		Month 11		Day 7		Year 17	
DESIGNATED FACILITY		16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____													
		17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Chris Micho 917 35029 [Signature] Month 11 Day 7 Year 17 Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____													
DESIGNATED FACILITY		18. Discrepancy 18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____ 18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____ Facility's Phone: _____ 18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____													
		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H075 2. _____ 3. _____ 4. _____													
DESIGNATED FACILITY		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____													

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417 0980		4. Manifest Tracking Number 010337745 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
		6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 236			
		7. Transporter 2 Company Name						U.S. EPA ID Number			
		8. Designated Facility Name and Site Address WAYNE DISPOSAL, INC 49350 N I-94 SERVICE DRIVE DELEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 048 090 633			
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
		1. HAZARDOUS WASTE SOLID, N.O.S. (P002), B, PGIII				1	GT	26	1	P002	
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information " 3123586V01/P002 Sol. Meeting Treatment Standards / *** ER CONTACT - SHELLY LAM ***" Area: TC-Disposal 001											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month 11	Day 7	Year 12	
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials										
	Transporter 1 Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month 11	Day 7	Year 12
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name						Signature		Month	Day	Year
	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection										
	Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number				
Facility's Phone: _____											
18c. Signature of Alternate Facility (or Generator)									Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H132				2.				3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
Printed/Typed Name						Signature		Month	Day	Year	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337713 JJK				
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 238						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831						
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
			No.	Type					
	1. KAS377, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII		1	DI	26		F002		
	2.								
	3.								
4.									
14. Special Handling Instructions and Additional Information 1. J12347, M001/F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Offor's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 11		Day 7	Year 12
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: Date leaving U.S.:						
Transporter signature (for exports only):									
17. Transporter Acknowledgment of Receipt of Materials									
Transporter 1 Printed/Typed Name Jim A. Thompson			Signature Jim A. Thompson			Month 11		Day 7	Year 12
Transporter 2 Printed/Typed Name			Signature			Month		Day	Year
18. Discrepancy									
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
Manifest Reference Number:									
18b. Alternate Facility (or Generator)			U.S. EPA ID Number						
Facility's Phone:									
18c. Signature of Alternate Facility (or Generator)						Month		Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H075		2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name			Signature			Month		Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337714 JJK													
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205													
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO						U.S. EPA ID Number ILR 000 135 230													
		7. Transporter 2 Company Name						U.S. EPA ID Number													
DESIGNATED FACILITY		8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 000 724 831													
		9a. HM						9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes					
TRANSPORTER		INT'L		GENERATOR		1. NA3077 HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII		No. 1		Type DT		26		F002							
DESIGNATED FACILITY		TRANSPORTER		INT'L		GENERATOR		14. Special Handling Instructions and Additional Information 1. 3123471MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME: SHELLY LAM ***													
								15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
								Generators/Offeror's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month 11		Day 7		Year 11	
								16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____													
								17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name William Morris						Signature William Morris		Month 11		Day 7		Year 11	
DESIGNATED FACILITY		TRANSPORTER		INT'L		GENERATOR		Transporter 2 Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____													
								18. Discrepancy													
								18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____													
								18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____ Facility's Phone: _____													
								18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____													
DESIGNATED FACILITY		TRANSPORTER		INT'L		GENERATOR		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H075 2. 3. 4.													
								20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name _____ Signature _____ Month _____ Day _____ Year _____													

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 882	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337715 JJK				
	5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219				Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
	Generator's Phone: (317) 491-4128									
	6. Transporter 1 Company Name BEELMAN TRUCKING CO				U.S. EPA ID Number ILR 000 135 236					
	7. Transporter 2 Company Name				U.S. EPA ID Number					
TRANSPORTER	8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111				U.S. EPA ID Number MID 000 724 831					
	Facility's Phone: (800) 592-5489									
	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	X	1. NA3077 HAZARDOUS WASTE SOLID, H.O.S. (F002), 9, PGIII			1		26		F002	
		2.								
DESIGNATED FACILITY										
14. Special Handling Instructions and Additional Information C 312347 (M01) F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generators/Offeror's Printed/Typed Name Shelly Lam										
Signature Shelly Lam										
Month Day Year 11 7 12										
TRANSPORTER INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____									
	Transporter signature (for exports only): _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name Mark Micie									
	Signature Mark Micie									
Month Day Year 11 7 12										
Transporter 2 Printed/Typed Name										
Signature										
Month Day Year										
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number									
	Facility's Phone: _____									
18c. Signature of Alternate Facility (or Generator)										
Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. H075 2. 3. 4.										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name										
Signature										
Month Day Year										

GENERATOR	UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337716 JJK					
	5. Generator's Name and Mailing Address AITH: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205							
	Generator's Phone: (317) 491-4128										
	6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236							
TRANSPORTER	7. Transporter 2 Company Name			U.S. EPA ID Number							
	8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 000 724 831							
	Facility's Phone: (800) 592-5489										
	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
DESIGNATED FACILITY	x 1.	HAZARDOUS WASTE SOLID, N.O.S. (F002); 9. POIII		1		DT	26	T	F002		
	2.										
	3.										
	4.										
14. Special Handling Instructions and Additional Information 1 J123471MD1 / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Offor's Printed/Typed Name Signature Month Day Year 11 7 12											
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____ Transporter signature (for exports only): _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name Signature Month Day Year 11 7 12										
	Transporter 2 Printed/Typed Name Signature Month Day Year										
	18. Discrepancy										
DESIGNATED FACILITY	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number										
	Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) Month Day Year										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
1. H075 2. 3. 4.											
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name Signature Month Day Year											

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337717 JJK			
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. NA3077, HAZARDOUS WASTE SOLID, H Q'S, (H002), 9, PGM		1	DT	26	1	H002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information E-312347/MDL/1002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offor's Printed/Typed Name Shelly Lam			Signature [Signature]			Month 11	Day 11	Year 11
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name KANDAK STAPLETON			Signature [Signature]			Month 11	Day 11	Year 12
Transporter 2 Printed/Typed Name			Signature			Month	Day	Year
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator)						U.S. EPA ID Number		
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator)						Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H075		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337718 JJK				
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 000 724 831										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
						No.	Type					
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII				1	DT	26	T	F002		
		2.										
		3.										
	4.											
14. Special Handling Instructions and Additional Information 1. 3123471MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME SHELLY LAM ***												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Officer's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month Day Year 11 7 12				
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials											
TRANSPORTER	Transporter 1 Printed/Typed Name ALLEN WHITE						Signature Allen White		Month Day Year 11 7 12			
	Transporter 2 Printed/Typed Name						Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number:											
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number					
	Facility's Phone:											
	18c. Signature of Alternate Facility (or Generator)								Month Day Year			
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1. H075				2.				3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name						Signature		Month Day Year				

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 602	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337719 JJK		
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name		U.S. EPA ID Number					
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 000 724 831					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
		1. NA3077, HAZARDOUS WASTE, SOLID, H.C.S. (F002), 9, PGIII	1	D1	26		F002
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. 312347 / MDL 71002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Shelly Lam		Signature Shelly Lam		Month Day Year 11 17 12			
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____				
	Transporter signature (for exports only): _____						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials						
	Transporter 1 Printed/Typed Name Dennis Adams		Signature Dennis Adams		Month Day Year 11 17 12		
	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number: _____						
	18b. Alternate Facility (or Generator)		U.S. EPA ID Number				
	Facility's Phone: _____						
	18c. Signature of Alternate Facility (or Generator)					Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
	1. H075	2.	3.	4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month Day Year			

Tuchman Cleaners

TO 0106

[illegible]

Tuchman Cleaners

TO 0106

[illegible]

Tuchman Cleaners

TO 0106

[illegible]

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 952 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337645 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831				
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		No.	Type				
	1. RA3077, HAZARDOUS WASTE SOLID, N.O.S., (P002), 9, PGIII	1	DT	26		P002	
	2.						
	3.						
	4.						
14. Special Handling Instructions and Additional Information T: 3123471M01 / P002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Shelly Lam		Signature Shelly Lam			Month 11	Day 11	
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit:			Year 12		
Transporter signature (for exports only):		Date leaving U.S.:					
17. Transporter Acknowledgment of Receipt of Materials							
Transporter 1 Printed/Typed Name 0021200 3027/3027		Signature Shelly Lam			Month 11	Day 11	
Transporter 2 Printed/Typed Name		Signature			Month 11	Day 11	
18. Discrepancy							
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
Manifest Reference Number:							
18b. Alternate Facility (or Generator) U.S. EPA ID Number							
Facility's Phone:							
18c. Signature of Alternate Facility (or Generator)					Month 11	Day 11	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)							
1. H075	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature			Month 11	Day 11	

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337646 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128				Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236								
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 000 724 831								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII			1		DT	26	T	F002
		2.								
		3.								
		4.								
14. Special Handling Instructions and Additional Information 1. J123471MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Officer's Printed/Typed Name: <u>Shelly Lam</u> Signature: <u>[Signature]</u> Month: <u>11</u> Day: <u>9</u> Year: <u>12</u>										
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
TRANSPORTER	Transporter 1 Printed/Typed Name: <u>Fred Pitts</u> Signature: <u>[Signature]</u> Month: <u>11</u> Day: <u>9</u> Year: <u>12</u>									
	Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____									
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator) _____ U.S. EPA ID Number _____ Facility's Phone: _____									
	18c. Signature of Alternate Facility (or Generator) _____ Month: _____ Day: _____ Year: _____									
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. <u>H075</u> 2. _____ 3. _____ 4. _____										
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337647 JJK				
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 000 724 831										
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
						No.	Type					
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (P002), 9, PGIII				1	DI	26	1	F002		
		2.										
		3.										
	4.											
14. Special Handling Instructions and Additional Information 1. 317 491 4128 / P002 SOL requiring treatment / *** ER CONTACT NAME - SHELLY LAM ***												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Officer's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month Day Year 11 11 12				
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name Mark Wiese						Signature Mark Wiese		Month Day Year 11 9 12			
	Transporter 2 Printed/Typed Name						Signature		Month Day Year			
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____											
	18b. Alternate Facility (or Generator) U.S. EPA ID Number											
	Facility's Phone: _____											
	18c. Signature of Alternate Facility (or Generator) Month Day Year											
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1. H075		2.		3.		4.						
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name						Signature		Month Day Year				

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337648 JJK																																																		
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205																																																		
GENERATOR		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236																																																		
		7. Transporter 2 Company Name						U.S. EPA ID Number																																																		
DESIGNATED FACILITY		8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 000 724 831																																																		
		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th rowspan="2">9a. HM</th> <th rowspan="2">9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))</th> <th colspan="2">10. Containers</th> <th rowspan="2">11. Total Quantity</th> <th rowspan="2">12. Unit Wt./Vol.</th> <th colspan="3">13. Waste Codes</th> </tr> <tr> <th>No.</th> <th>Type</th> <th></th> <th></th> <th></th> </tr> <tr> <td>X</td> <td>1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII</td> <td>1</td> <td>DT</td> <td>26</td> <td>T</td> <td>F002</td> <td></td> <td></td> </tr> <tr> <td></td> <td>2.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>3.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>4.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			No.	Type				X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1	DT	26	T	F002				2.									3.									4.								14. Special Handling Instructions and Additional Information 1. J123471MD1 / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))									10. Containers				11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes																																										
								No.	Type																																																	
X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII							1	DT	26	T	F002																																														
	2.																																																									
	3.																																																									
	4.																																																									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.																																																										
Generator's/Offor's Printed/Typed Name Shelly Lam						Signature Shelly Lam			Month 11	Day 9	Year 12																																															
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.						Port of entry/exit:			Date leaving U.S.:																																																	
Transporter signature (for exports only):																																																										
TRANSPORTER		17. Transporter Acknowledgment of Receipt of Materials																																																								
		Transporter 1 Printed/Typed Name Jim S. ...						Signature Jim S. ...			Month 11	Day 9	Year 12																																													
DESIGNATED FACILITY		Transporter 2 Printed/Typed Name						Signature			Month	Day	Year																																													
		18. Discrepancy																																																								
DESIGNATED FACILITY		18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection																																																								
		Manifest Reference Number:																																																								
		18b. Alternate Facility (or Generator)						U.S. EPA ID Number																																																		
		Facility's Phone:																																																								
DESIGNATED FACILITY		18c. Signature of Alternate Facility (or Generator)						Month			Day	Year																																														
		19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)																																																								
		1. H075		2.		3.		4.																																																		
		20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a																																																								
DESIGNATED FACILITY		Printed/Typed Name						Signature			Month	Day	Year																																													

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 932 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337649 JJK				
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
		6. Transporter 1 Company Name BEELMAN TRUCKING CO.						U.S. EPA ID Number ILR 000 135 236				
		7. Transporter 2 Company Name						U.S. EPA ID Number				
		8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489						U.S. EPA ID Number MID 000 724 831				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
						No.	Type					
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), W, PGIII				1	DI	26		F002		
		2.										
		3.										
	4.											
14. Special Handling Instructions and Additional Information 1. 312347 MD077 F002 Sol Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generator's/Offor's Printed/Typed Name Shelly Lam						Signature Shelly Lam		Month 11		Day 9		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials											
	Transporter 1 Printed/Typed Name Dennis Evans						Signature Dennis Evans		Month 11		Day 9	
	Transporter 2 Printed/Typed Name						Signature		Month		Day	
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number: _____											
	18b. Alternate Facility (or Generator)						U.S. EPA ID Number					
	Facility's Phone: _____											
	18c. Signature of Alternate Facility (or Generator)						Month		Day		Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)												
1. H075				2.				3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a												
Printed/Typed Name						Signature		Month		Day		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337650 JJK	
5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
Generator's Phone: (317) 491-4128						
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236			
7. Transporter 2 Company Name			U.S. EPA ID Number			
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111			U.S. EPA ID Number MID 000 724 831			
Facility's Phone: (800) 592-5489						
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.
			No.	Type		
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (F002), 9, PGIII	1	DT	26	T
		2.				
		3.				
		4.				
14. Special Handling Instructions and Additional Information 1. J123471MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***						
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.						
Generators/Offeror's Printed/Typed Name Shelly Lam		Signature <i>[Signature]</i>		Month Day Year 11/9/12		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____					
	17. Transporter Acknowledgment of Receipt of Materials					
	Transporter 1 Printed/Typed Name Chris Nitcher 917 335 049		Signature <i>[Signature]</i>		Month Day Year 11/9/12	
	Transporter 2 Printed/Typed Name		Signature		Month Day Year	
DESIGNATED FACILITY	18. Discrepancy					
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection					
	Manifest Reference Number: _____					
	18b. Alternate Facility (or Generator)				U.S. EPA ID Number	
	Facility's Phone: _____					
	18c. Signature of Alternate Facility (or Generator)				Month Day Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H075		2.		3.		4.
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a						
Printed/Typed Name		Signature		Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 862	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337651 JJK		
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO			U.S. EPA ID Number ILR 000 135 236				
7. Transporter 2 Company Name			U.S. EPA ID Number				
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831				
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
			No.	Type			
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII	1	DT	26	1	F002
		2.					
		3.					
		4.					
14. Special Handling Instructions and Additional Information 1. J12347(MDI) F002 Sol Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.							
Generator's/Offor's Printed/Typed Name Shelly Lam		Signature Shelly Lam		Month 11		Day 11	Year 12
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: _____ Date leaving U.S.: _____				
	Transporter signature (for exports only):						
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials		Signature		Month Day Year		
	Transporter 1 Printed/Typed Name Allen White		Signature Allen White		Month Day Year 11 7 12		
TRANSPORTER	Transporter 2 Printed/Typed Name		Signature		Month Day Year		
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	Manifest Reference Number:						
	18b. Alternate Facility (or Generator) U.S. EPA ID Number						
DESIGNATED FACILITY	Facility's Phone:						
	18c. Signature of Alternate Facility (or Generator) Month Day Year						
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)						
1. H075		2.		3.		4.	
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a							
Printed/Typed Name		Signature		Month		Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337652 JJK				
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205				
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236										
7. Transporter 2 Company Name		U.S. EPA ID Number										
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111		U.S. EPA ID Number MID 000 724 831										
Facility's Phone: (800) 592-5489												
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
						No.	Type					
	X	1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002); 9, PGIII				1	DT	26	T	F002		
		2.										
		3.										
		4.										
14. Special Handling Instructions and Additional Information 1. J123471MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***												
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.												
Generators/Officer's Printed/Typed Name Shelly Lam												
Signature <i>[Signature]</i>												
Month Day Year 11 17 12												
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____											
	17. Transporter Acknowledgment of Receipt of Materials											
TRANSPORTER	Transporter 1 Printed/Typed Name Beelman Trucking											
	Signature <i>[Signature]</i>											
DESIGNATED FACILITY	Transporter 2 Printed/Typed Name											
	Signature <i>[Signature]</i>											
DESIGNATED FACILITY	18. Discrepancy											
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection											
	Manifest Reference Number: _____											
	18b. Alternate Facility (or Generator) U.S. EPA ID Number											
	Facility's Phone: _____											
	18c. Signature of Alternate Facility (or Generator)											
	Month Day Year											
	19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)											
	1. H075		2.		3.		4.					
	20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a											
	Printed/Typed Name											
	Signature											
	Month Day Year											

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337641 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831					
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S. (F002), 9, PGIII		1	01	26	1	F002	
	2.							
	3.							
4.								
14. Special Handling Instructions and Additional Information 1. 312347 MCL/F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name Shelly Lam			Signature Shelly Lam			Month 11		Day 3
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: Date leaving U.S.:					
Transporter signature (for exports only):								
17. Transporter Acknowledgment of Receipt of Materials								
Transporter 1 Printed/Typed Name Fred H. ...			Signature Fred H. ...			Month 11		Day 3
Transporter 2 Printed/Typed Name			Signature			Month 11		Day 3
18. Discrepancy								
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection								
Manifest Reference Number:								
18b. Alternate Facility (or Generator) U.S. EPA ID Number								
Facility's Phone:								
18c. Signature of Alternate Facility (or Generator) Month Day Year								
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. H075		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337642 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128		Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205						
6. Transporter 1 Company Name BEELMAN TRUCKING CO		U.S. EPA ID Number ILR 000 135 236								
7. Transporter 2 Company Name		U.S. EPA ID Number								
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 000 724 831								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers No. Type		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
		1. NA3077, HAZARDOUS WASTE SOLID, N.O.S., (F002), 9, PGIII			1		DT	26	T	F002
		2.								
		3.								
		4.								
14. Special Handling Instructions and Additional Information 1. J123471MDI / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***										
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.										
Generator's/Offor's Printed/Typed Name: <u>Shelly Lam</u> Signature: <u>[Signature]</u> Month: <u>11</u> Day: <u>3</u> Year: <u>12</u>										
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Transporter signature (for exports only): _____ Date leaving U.S.: _____									
	17. Transporter Acknowledgment of Receipt of Materials									
	Transporter 1 Printed/Typed Name: <u>Mark Wiese</u> Signature: <u>[Signature]</u> Month: <u>11</u> Day: <u>8</u> Year: <u>12</u> Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____									
DESIGNATED FACILITY	18. Discrepancy									
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
	Manifest Reference Number: _____									
	18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____									
	Facility's Phone: _____									
18c. Signature of Alternate Facility (or Generator) Month: _____ Day: _____ Year: _____										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)										
1. H075			2.		3.		4.			
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a										
Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662	2. Page 1 of 1	3. Emergency Response Phone (317) 417-0980	4. Manifest Tracking Number 010337643 JJK			
5. Generator's Name and Mailing Address ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128			Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205					
6. Transporter 1 Company Name BEELMAN TRUCKING CO.			U.S. EPA ID Number ILR 000 135 236					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489			U.S. EPA ID Number MID 000 724 831					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	1.	HA3077, HAZARDOUS WASTE SOLID, N.O.S. (P002), 9, PGIII	1	DT	26	T	F002	
	2.							
	3.							
	4.							
14. Special Handling Instructions and Additional Information 1. J1234/TMDI/F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Offeror's Printed/Typed Name Shelly Lam			Signature <i>Shelly Lam</i>			Month 11	Day 8	Year 12
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.		Port of entry/exit: Date leaving U.S.:					
	Transporter signature (for exports only):							
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name Dennis Ebers		Signature <i>Dennis Ebers</i>			Month 11	Day 8	Year 12
	Transporter 2 Printed/Typed Name		Signature			Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	Manifest Reference Number:							
	18b. Alternate Facility (or Generator)					U.S. EPA ID Number		
	Facility's Phone:							
	18c. Signature of Alternate Facility (or Generator)					Month	Day	Year
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
	1. H075	2.	3.	4.				
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month	Day	Year

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND 982 425 662		2. Page 1 of 1		3. Emergency Response Phone (317) 417-0980		4. Manifest Tracking Number 010337644 JJK			
		5. Generator's Name and Mailing Address US EPA REGION V ATTN: SHELLY LAM 2525 N SHADELAND AVE INDIANAPOLIS, IN 46219 Generator's Phone: (317) 491-4128						Generator's Site Address (if different than mailing address) 4401 N KEYSTONE INDIANAPOLIS, IN 46205			
6. Transporter 1 Company Name BEELMAN TRUCKING CO.		U.S. EPA ID Number ILR 000 135 236									
7. Transporter 2 Company Name		U.S. EPA ID Number									
8. Designated Facility Name and Site Address MICHIGAN DISPOSAL WTP 49350 N I-94 SERVICE DRIVE BELLEVILLE, MI 48111 Facility's Phone: (800) 592-5489		U.S. EPA ID Number MID 000 724 831									
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
						No.	Type				
		X 1. NA3077, HAZARDOUS WASTE SOLID, N.O.S. (F002), 9, PGIII				1	DT	76	T	F002	
		2.									
		3.									
	4.										
14. Special Handling Instructions and Additional Information 1. J12347 (MCI) / F002 Soil Requiring Treatment / *** ER CONTACT NAME - SHELLY LAM ***											
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.											
Generator's/Officer's Printed/Typed Name: Shelly Lam Signature: [Signature] Month: 11 Day: 8 Year: 12											
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____										
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: Chris Nitcher 917 388 009 Signature: [Signature] Month: 11 Day: 8 Year: 12 Transporter 2 Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____										
DESIGNATED FACILITY	18. Discrepancy										
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection Manifest Reference Number: _____										
	18b. Alternate Facility (or Generator) U.S. EPA ID Number: _____										
	Facility's Phone: _____										
	18c. Signature of Alternate Facility (or Generator) Month: _____ Day: _____ Year: _____										
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H075 2. 3. 4.											
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: _____ Signature: _____ Month: _____ Day: _____ Year: _____											

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND982425662		2. Page 1 of 1		3. Emergency Response Phone 937 602 3089		4. Manifest Tracking Number 008315060 JJK							
		5. Generator's Name and Mailing Address US EPA 2525 N Badeland Ave Indianapolis, IN 46205		Generator's Site Address (if different than mailing address) 4401 N Keystone Ave Indianapolis, IN 46219											
6. Transporter 1 Company Name SWS Environmental Services		U.S. EPA ID Number FL0000936831		7. Transporter 2 Company Name SWS Environmental Services		U.S. EPA ID Number FL0000936831		8. Designated Facility Name and Site Address PetroChem Processing Group 421 Lyncaste St Detroit, MI 48214							
Facility's Phone: (313) 424-5840		U.S. EPA ID Number MID980615298		9a. HM		9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers No. Type		11. Total Quantity		12. Unit Wt./Vol.		13. Waste Codes	
GENERATOR		1. X RQ Hazardous Waste Liquid, NOS, (Tetrachlorobenzene, Vinyl Chloride) 9, NA3082, III C (P = D039, D043)		2		DM		55		2		D039 D043			
		2. X RQ Hazardous Waste Liquid, NOS (Tetrachlorobenzene, Vinyl Chloride) 9, NA3082, III C (P = D039, D043)		1		DF		55		2		D039 D043			
		3.													
		4.													
14. Special Handling Instructions and Additional Information CERLA SWS #: Weston IND-USEPA PSC Profile #: INC17		CN4-111-1496 82392													
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.															
Generator's/Offor's Printed/Typed Name Shelly Lam Signature Shelly Lam Month 11 Day 23 Year 11															
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____															
17. Transporter Acknowledgment of Receipt of Materials															
Transporter 1 Printed/Typed Name Robert Myers Signature Robert Myers Month 11 Day 23 Year 11															
Transporter 2 Printed/Typed Name Jeremy Sargent Signature Jeremy Sargent Month _____ Day _____ Year _____															
18. Discrepancy															
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input checked="" type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection															
Manifest Reference Number: _____															
18b. Alternate Facility (or Generator) U.S. EPA ID Number _____															
Facility's Phone: _____															
18c. Signature of Alternate Facility (or Generator) _____ Month _____ Day _____ Year _____															
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)															
1. H141 2. H141 3. _____ 4. _____															
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a															
Printed/Typed Name S. Jabalee Signature S. Jabalee Month 12 Day 01 Year 11															

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number IND982425662		2. Page 1 of 1		3. Emergency Response Phone 937 602 3089		4. Manifest Tracking Number 008315060 JJK					
		5. Generator's Name and Mailing Address US EPA 2525 N Adeland Ave Indianapolis, IN 46205						Generator's Site Address (if different than mailing address) 4401 N Keystone Ave Indianapolis, IN 46219					
6. Transporter 1 Company Name SWS Environmental Services		Generator's Phone: (317) 417-9980						U.S. EPA ID Number FL0000936831					
7. Transporter 2 Company Name								U.S. EPA ID Number					
8. Designated Facility Name and Site Address PetroChem Processing Group 421 Lyncaste St Detroit, MI 48214		Facility's Phone: (313) 824-5840						U.S. EPA ID Number WID980615298					
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))				10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes			
						No.	Type						
		1.	Hazardous Waste Liquid, NOS, (Tetrachloroethylene, vinyl chloride) 9, NA3082, III (P) (2002, 2003)				2	DM			INC17		
		2.											
		3.											
	4.												
14. Special Handling Instructions and Additional Information CERCLA SWS #: WES/ORTWB-USEPA PSC Profile #: INC17													
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.													
Generator's/Offeror's Printed/Typed Name						Signature				Month	Day	Year	
INT'L	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____												
	Transporter signature (for exports only): _____												
TRANSPORTER	17. Transporter Acknowledgment of Receipt of Materials												
	Transporter 1 Printed/Typed Name						Signature				Month	Day	Year
	Transporter 2 Printed/Typed Name						Signature				Month	Day	Year
DESIGNATED FACILITY	18. Discrepancy												
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection												
	Manifest Reference Number: _____												
	18b. Alternate Facility (or Generator) U.S. EPA ID Number												
	Facility's Phone: _____												
	18c. Signature of Alternate Facility (or Generator)									Month	Day	Year	
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)													
	1.	2.	3.	4.									
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a													
Printed/Typed Name						Signature				Month	Day	Year	